



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Isao MOCHIDA et al.

Title: EXHAUST GAS TREATING SYSTEMS

Prior Appl. 09/219,870

Filing Date: December 24, 1998

Appl. No.: UNASSIGNED

Filing Date: August 21, 2000

Examiner: Not yet assigned

Art Unit: Not yet assigned

DIVISIONAL PATENT APPLICATION TRANSMITTAL

Assistant Commissioner for Patents Box PATENT APPLICATION Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

i i Conuncation i a i Divisional i i Continuation-in-Part ([] Continuation	[X	Divisional	[] Continuation-In-Part	(CIP
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of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this divisional application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying divisional application and is hereby incorporated by reference therein.

Enclosed are:

- [X] Specification, Claim(s), and Abstract (42 pages).
- [X] Formal drawings (17 sheets, Figures 1-18).
- [X] Declaration and Power of Attorney (5 pages).
- [X] Preliminary Amendment (3 pages).





[X] Information Disclosure Statement (2 pages).

[X] Form PTO-1449 (1 page).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee	-	Extra Claims	•	Rate		Fee Totals
Basic Fee							\$690.00		\$690.00
Total Claims:	5	-	20	=	0	x	\$18.00	=	\$0.00
Independents:	2	-	3	_ = '	0	×	\$78.00	=	\$0.00
If any Multiple Dependent Claim(s) present: + \$260.00							=	\$0.00	
							SUBTOTAL:	= '	\$690.00
[]	Small	Enti	ity Fees A	Apply	/ (subtrac	ct ½	of above):	=	\$0.00
					TOT	AL F	ILING FEE:	=	\$690.00

- A check in the amount of \$690.00 to cover the filing fee is enclosed.
- The required filing fees are not enclosed but will be submitted in response to the [] Notice to File Missing Parts of Application.
- [X] The Assistant Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17. or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Assistant Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date **August 21, 2000**

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